CARUS CHEMICAL FIRE INCIDENT ACTION PLAN



LaSalle, Illinois DATE: 12 January 2023

0800 -2000 Hours

INCIDENT OBJECTIVES (ICS 202)

	g``````````````````````````````	***************************************	***************************************					
1. Incident Name: Carus Chemical Fire	2. Operational Period:	Date From: 12 Jan 2023 Time From: 0800	Date To: 12 Jan 2023 Time To: 2000					
3. Objective(s):	I	16116 1 10111. 0000	11116 10. 2000					
 Maintain the safety of firefighters, other personnel, and the public as the highest priority through the incident. Maintain control and possession of the site and provide fire protection to any required areas. Maintain and develop partnerships and relationships with response staff, cooperators, the local communities and stakeholders with effective and timely dialogue, meetings, and comprehensive information sharing. Minimize impacts to natural resources. Foster an atmosphere free of discrimination, sexual harassment, and other forms of inappropriate behavior. Provide initial attack immediate response within the response area. 								
	·							
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***************************************						
4. Operational Period Command Emphas								
Safety of all Personnel, Do not enter the fire building, D	econ all personnel and equimen	t.						
General Situational Awareness			***************************************					
This was a chemical fire involving a strong alkaline subs	tanna Injuriae baya manyerad ar	of more visitaments are also dead.						
your coots as it will not dilute the alkaling and can cause	chemical burns to your feet. Ini	ure will occur before you feel di-	constart Darennel kusiana in a					
MUST; do not eat, drink or smoke until you have washe existence chemical hazards.	d your hands. Do not enter any t	uilding unless an operation has	s been approved due to the					
	****							
	5. Site Safety Plan Required? Yes No							
Approved Site Safety Plan(s) Located at:								
6. Incident Action Plan (the items checked	below are included in this	Incident Action Plan):	**************************************					
	9	Other Attachments:						
☑ ICS 204 ☑ ICS 208								
☑ ICS 205A	st/Tides/Currents							
7. Prepared by: Name: Daniel J. Ellis	Position/Title: PSC2	Signature	: <u>280</u>					
8. Approved by Incident Commander: Na		Signature:	tall tall					
ICS 202   IAP Page 2		-	(					
IMF raye -	Date/Time: 12 Jan 202	S OCOUPINS	***************************************					

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name Carus Chemical Fire	00000000000000000000000000000000000000		Time F	Ional Period: Date From: 12 Jan 2023 Date To: 12 Jan 2023 Time From: 0800 Time To: 2000					
3. Incident Comr	nander(s) and Comma	nd Staff:	7. Operations Sec	***************************************					
IC/UCs	Jerry Janick / Brian VanVick	le	Chief	Tim O'Keefe					
			Deputy						
Deputy			Staging Area						
Safety Officer	Kyle Hill / Dave Saitta		Branch	<u>'</u>					
Public Info. Officer	Breft Badar		Branch Director						
Liaison Officer	Brian Bressner 815-712-729	11	Deputy						
4. Agency/Organization Representatives:		s:	Division/Group						
Agency/Organization	n Name		Division/Group						
IEMA	Kathy Spillman / Steve	Builta	Division/Group						
IL EPA	Eric Borys		Division/Group						
US EPA	Robert Kondreck		Division/Group						
LaSalle County EMA	Fred Moore	*******************************	Branch						
LaSalle Police	Chief Zmudzinski		Branch Director						
Carus LLC	John Stewart		Deputy						
5. Planning Secti	on:	***************************************	Division/Group						
C	hief Dan Ellis	***************************************	Division/Group						
Dej	outy	***************************************	Division/Group						
Resources	Unit Ryan Ellis	***************************************	Division/Group						
Situation I	Unit Jeff Althoff	***************************************	Division/Group						
Documentation I	Jnit	THE SECOND CONTRACTOR OF THE SECOND	Branch						
Demobilization I	Jnit	***************************************	Branch Director						
Technical Special	ists	***************************************	Deputy						
			Division/Group						
			Division/Group						
			Division/Group						
6. Logistics Section	on:		Division/Group						
C	nief Matt Cordonnier		Division/Group						
Dep	uty Tyler Carls	***************************************	Air Operations Branc	:h					
Support Brar	ich		Air Ops Branch Dir.						
Direc	dor								
Supply L	Jnit	***************************************							
Facilities \	Init		8. Finance/Adminis	stration Section:					
Ground Support U	Jnit	***************************************	· · · · · · · · · · · · · · · · · · ·	John Ducan					
Service Bran	ch		Deputy						
Direc	tor		Time Unit						
Communications L	Init Kevin Lalley / John Giro	ne	Procurement Unit						
Medical U	Init	ddedadaan maasaasaa sa aa fa waxaa ay wax	Comp/Claims Unit						
Food U	Init		Cost Unit						
9. Prepared by: N	ame: Ryan Ellis	Position	√Title: ResL	Signature: <u>Ryan</u> (llis					
CS 203	IAP Page 3	······································	me: 12 Jan 2023	3,100					

### **ASSIGNMENT LIST (ICS 204)**

1. Incident Name:			ational Pe		3.	
Carus Chemical Fire			o <mark>m:</mark> 12 Jan om: 0800	Branch:		
4. Operations Persor	nel: Name		J.111. UBUU	Time To: 2000  Contact Number(s)		
•				815-509-5620	Division:	
Operations Section C	hief: Tim O'	neere		919-504-5050	Group:	
Branch Dire	ctor:				FIRE RESPONSE Staging Area:	
Division/Group Superv	/isor: MABA	S 13 Chief L	eek			
5. Resources Assign	ed:		22		Reporting Location,	
Resource Identifier	Leader		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Special Equipment and Supplies, Remarks, Notes, Information	
Taskforce 1						
St Charles Engine			4			
North Aurora Engine			4			
Big Rock Engine			4			
Aurora Truck			4			
Aurora Ambulance			2			
Batavia Ambulance			2			
6. Work Assignment	**************************************	090000000000000000000000000000000000000	nesen juris a consessa de la consess			
Respond as requested for a	fire response v	athin the Cit	y of LaSalle	including the Carus Chemical site.		
Decon personnel and equip	ment. Do not er	iter the cont	aminated ar	ea.		
Respond to requests for aut						
The second secon						
7. Special Instruction	)C.					
Illinois Valley Regional Disp		141				
			Mind out of	the N 15-20 mph Chance of rain 5%	Sunrise 0721 Hours	
Weather: Days Cloud Evening Cloud				the NNW 15-25 mph Chance of flurries 5%	Sunset 1648 Hours	
1	radio and/or	•		nbers needed for this assignment):		
Name/Function				ontact: indicate cell, pager, or radio (f	requency/system/channel)	
	Fire Supression	*****	G Red			
Fire Dispatch / I	I Valley Dispato	<u>h 1</u>	51.355			
9. Prepared by: Nam	ie: <u>Daniel J. B</u>	Ellis	Posi	tion/Title: PSC Signa	ature: <u>282                                   </u>	
ICS 204	IAP Page	4	Date	/Time: 12 Jan 2023 0200 Hours		

Incident Name	COMMUNICATIONS PLAN	JAN					-					200301
	Name		CARUS Chemical Fire	mical Fire		Operational Period	Period	***************************************	GVI	100 Dags		22.20
cident I	Incident Number				***************************************	Date	44937		C I	280	0000	*
					Basic Radio Channel Us	hannellOse					202	1
Š	Function	Accionmont	Sugar	Zone /	Channel /	Rx Freq	Rx Tone	Tx Freq N	Tx Tone	Monite	Monitored in	
$\dashv$		Assignment.	System	Bank	Talk Group	Nor≪	×ov		Norw	30	CP/UCP	Comments
7	Command								***************************************	, ,		***************************************
2	Support	Logistics		***************************************			***************************************		-	][	- 1	***************************************
æ	Tactical	Suppression			FG Red					][		
4	Tactical	Haz Mat			FG Blue				***************************************	<b>]</b> [	- 1	***************************************
S	Tactical	Decon		47-498-596	FG White				***************************************	٦		***************************************
9	Tactical	Damage Assessment			VTAC14				***************************************	$\neg \neg$		***************************************
Bren	Tactical	Security		5-830-260	IL Valley Disp		***************************************			ב ב ב ב		
00	Staging	Staging			FFRN	154 265		1CX 3CC		) [c		
						200		C07.4CT	***************************************		- 3	
101											2	
11	***************************************										No ON	
12									***************************************	Yes	□ %	
1 5										, Ces □	□ 2	
								-		Yes 🗆		
	Fire Dispatch	II. Valley Dispatch			Fire Dispatch	151.355	136.5 PL	151.355	136.5 Pt	E	1	
15 Poli	Police Dispatch	IL Valley Dispatch			PD Dispatch	154.815	114 DPL	154.815	114.0pi		4	
					Specialinst	ructions					#40000	

PAGE 5

INCIDENT TELEPHO	NE LIST		***************************************		<del></del>	ICS 205
Incident Name	*************	S Chemical Fire	Operational P	eriod I	AP Page (	
Incident Number			Date 1/11/2023		Time 000	
		Felephone and				
Name		ICS Position	Telephone		Email	
John Stewart	***************************************	Plant Manager CARUS	Ex. 6 Personal Privacy (PI	2)		***************************************
Brian Smith		Plant Liasion	815-228-3084		······	
Jerry Janick	***************************************	LaSalle Fire Chief	815-481-2351	i.janic	@lasalle-il.o	v
Dave Fleege		MABAS Operations Chief	630-200-2977	~~~	***************************************	***************************************
MABAS Dispatch	***************************************	Red Center	847-498-5968	dispate	ch@redcente	r.org
Brian Breessner VP	Div 25	Ottawa Fire Chief	815-712-7291		***************************************	***************************************
Brent Bader		PIO City of LaSalle	815-830-2600	bbade	r@lasalle-il.g	ΟV
John Nevins Pres Div 25		Naplate Fire Department	815-883-1282	Ex. 6	Personal Priv	acy (PP)
Kathy Spellman		IEMA Region 2 Coordinator	815-440-1145	kathy.	spellman.illin	ois.gov
Greg Whalen		OSFM - Area Commander	217-782-9116	(dgreg.w	halen@illino	s.gov
Sgt Parnell		LaSalle PD - overnite watch	815-488-2918			
Sgt Phil Wire		Conservation Police	815-641-3248			
Robert Kondreck		USEPA On Scene Coord	321-758-6517	kondre	ck.robert@e	pa.gov
Eric L. Dangoy		US Dept of Labor	630-300-7113	dango	z.eric.1@dol.	gov
Eric Borys		IL EPA	847-404-1931	eric.bo	rys@illinois.p	<u>(ον</u>
Andrew Whiitaker		HEPACO Project Manager	779-771-8573	awhitt	aker@HEPAC	O.com
Shelley Corban		Senior Mngr CARUS	Ex. (	Person	al Privacy (P	P)
L Valley Regional Di	spatch	LaSalle Dispatch	815-224-6029			
Fred Moore		LaSalle County EMA	815-481-0110	fmoore	@lasallecou	nty.org
Brian VanVickle	~~~~~	NW IL IMAT I/C	815-994-8522	bvanvi	ckle@ogleco	unty.org
	····					
***************************************						
***************************************						
***************************************						
***************************************						
***************************************						
***************************************						
***************************************					383534444444444444444444444444444444444	
***************************************	~**				***************************************	
		***************************************				
***************************************					***************************************	
		······································				*******************************
		***************************************				
		***************************************			****	
	,					
repared by:	COML	プ らパントナ Signature:	NAMI/I	Date #	###### Tim	e 20:1

PAGE 6

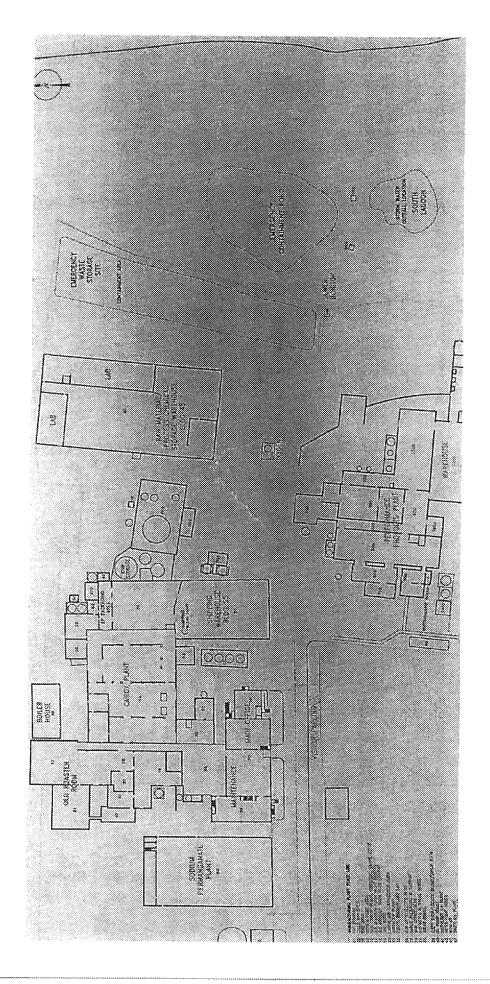
#### MEDICAL PLAN (ICS 206)

1. Incident Nan Carus Chemical			2. Operational Period:				ate To: 1/12/23 ime To: 2800	
3. Medical Aid	Stations:	***************************************	***************************************	**************************************	***************************************		499	
Name			h	***************************************		ontact		medics
Bloomington Med		Ota-Uan O Ota	Location	***************************************		s)/Frequency		Site?
Diodinington Med	JIC 5	Sterling @ 8th			FG Blue 15	i4.295 PL 91.5	⊠Ye	s No
	***************************************		***************************************	······		······································	☐Ye	s No
	***************************************					·····	<u></u> ∐Ye	s No
				******************			Ye	s No
			***************************************				☐ Ye	s No
	*******************************		***************************************	***************************************		***************************************	Ye	s 🗌 No
4. Transportation (indicate air or ground):								
Ambulance S	Service		Location		1	ontact s)/Frequency	Lovele	Constan
Bloomington Medic 5 Sterling @ 8th S				•	<u> </u>	4.295 PL 91.5		of Service □ □BLS
Division 6	······	1227 5th Street,		***************************************		4.295 PL 91.5		*************************
OSF Lifeflight	1,22,01,041			***************************************	309-624-23			*******
					000 02 7 20	<u> </u>	XALS	***************************************
5. Hospitals:								, Mora
	T A	ddress,	Contact	Tra	vel Time	I	T	
	Latitude & Longitude		Number(s)/		YGI IIIIG	Trauma	Burn	
Hospital Name	<del>•</del>	Helipad	Frequency	Air	Ground	Center	Center	Helipad
St. Margaret's Health - Peru	925 West Street, Peru, IL 61354		815-223-3300		2 mins	☐Yes Level:	☐Yes 区No	∑Yes No
OSF St. Elizabeth	1100 E. Norris Dr., Ottawa, IL 61350		815-433-3100		20 mins	☐Yes Level:	Yes X No	⊠Yes No
OSF St. Anthony	5668 E Sta Rockford,		815-226-2000	20 min:	s 60 mins	⊠Yes Level: 1	Yes	Yes No
OSF St. Francis	530 NE Glen Oak Ave, Peoria, IL 61637		309-655-2000	20 min:	s 60 mins	⊠Yes Level: ¹	Yes	Yes No
						☐Yes	Yes	Yes
6 Spacial Madia	ai Cmar-	nous Dronnellus		***************************************		Level:	□No	□No
6. Special Medical Emergency Procedures:								
Firefighters exiting	g the hotzo	ne should be dec	ontaminated and n	nedically	evaluated.			
								I
								1
								ı
Check box if a	viation ass	ets are utilized fo	r rescue. If assets	are use	d, coordinate	e with Air <b>⊘</b> pera	itions.	***************************************
			e: Jeff Althoff,SitL	***************************************	Signa		~~	
8. Approved by (	***************************************		***************************************	***************************************	Signatur			$H \rightarrow H$
ICS 206	***************************************	***************************************		1/22 @	·-	~ <i></i>		
ICS 206 IAP Page Date/Time:								

#### SAFETY MESSAGE/PLAN (ICS 208)

Carus Chemical Fire  3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:  The most significant safety issue at this incident is exposure to any chemicals or runnof from fire suppression activities. Post extinguishment, there is little disk for respiratory exposure, however, all firefighting activities should be performed while using SCBA. All firefighting gears should be worn while operating within the fenced-in perimeter of the feality. All personnel that have been working inside the fenced-in perimeter of the feality. All safety vests and head protection should be worn by all on-site support staff that are not engaged in firefighting activities. Contact with the material will cause burns to the skin, eyes and mucous membranes. Signs of exposure to chemicals safety vests and head protection of the skin, imitation to the eyes, and difficulty breathing. In case of contact with the skin, remove contaminated clothing and flush with plenty of water. If contact with eyes, removed contact with the skin, remove contaminated clothing and flush with plenty of water. If contact with eyes, removed contact removed contact makes and supplemental oxygen as needed.  All injuries should be reported to EMS personnel for further treatment and transportation. Any personnel requiring transport to a medical facility should be accompanied by a copy of the Safety Dala Sheet (SDS) of the suspected chemical involved in the exposure. EMS personnel working on site.  Rest periods should be provided for all personnel working on site.  Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Withough there is a only a slight chance of rain, personnel should be aware of slick spots due to wet surfaces. Warm John John Safety Plan(8) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature:	1. Incident Name:	***************************************			***************************************		,	***************************************
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:  The most significant safety issue at this incident is exposure to any chemicals or runoff from fire suppression activities. Post extinguishment, there is little risk for respiratory exposure, however, all firefighting activities should be performed while using SCBA. All firefighting gears should be worn while operating within the fenced-in perimeter of fleatily. All personnel that have been working inside the tenced-in perimeter, must go through the decontamination area. Histis safety vests and head protection should be worn while one that support staff that are not engaged in firefighting activities. Contact with the material will cause burns to the skin, eyes and mucous membranes. Signs of exposure to chemicals include reddening or discoloration of the skin, irritation to the eyes, and difficulty breathing. In case of contact with the skin, remove contaminated clothing and flush with plenty of water. If contact with eyes, removed contact lenses and flush with plenty of water for up to 15 minitues. In case of shortness of breath, move to fresh air and provide supplemental oxygen as needed.  All injuries should be reported to EMS personnel for further treatment and transportation. Any personnel requiring transport to a medical facility should be accompanied by a copy of the Safety Data Sheet (SDS) of the suspected chamical involved in the exposure. EMS personnel can be located at 8th Street and Sterling Street.  Rest periods should be provided for all personnel working on site.  Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Withough there is a only a slight chance of rain, personnel should be aware of slick spots due to well surfaces. Warm John Safety Plan (e.g.) Located At:  Propared by: Name: Kyle Hill  Position/Title: IMAT Safety  Signature: ADD-LADD-LADD-LADD-LADD-LADD-LADD-LADD-	Carus Chemical Fire			2. Operation	nal Period:			
The most significant safety issue at this incident is exposure to any chemicals or runoff from fire suppression activities. Prost extinguishment, there is little risk for respiratory exposure, however, all firefighting activities should be performed while using SCBA. All firefighting gear should be worn while operating within the fenced-in perimeter of the facility. All personnel that have been working inside the fenced-in perimeter, must go through the decontamination area. Hi-Nis safety vests and head protection should be worn by all on-site support staff that are not engaged in firefighting activities. Contact with the material will cause burns to the skin, eyes and mucous membranes. Signs of exposure to chemicals include reddening or discoloration of the skin, imitation to the eyes, and difficulty breathing. In case of contact with the skin, remove contaminated clothing and flush with plenty of water. If contact with eyes, removed contact lenses and supplemental oxygen as needed.  All injuries should be reported to EMS personnel for further treatment and transportation. Any personnel requiring transport to a medical facility should be accompanied by a copy of the Safety Data Sheet (SDS) of the suspected chemical involved in the exposure. EMS personnel can be located at 8th Street and Sterling Street.  Rest periods should be provided for all personnel working on site.  Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. National provides and the support of the support of the support of sites and sterling Street.  Site Safety Plan Required? Yes Now Approved Site Safety Plan(s) Located At:  Prepared Site Safety Plan(s) Located At:  Prepared by: Name Kyle Hill  Position/Title: MAT Safety  Signature:  Prepared by: Name Kyle Hill  Prostion/Title: MAT Safety	3. Safety Message/	Expanded Safety	Maes	ana Calaba	Diam (014 o 6	Time From:	0000	Time To: 0800
skin, remove contaminated clothing and flush with plenty of water. If contact with eyes, removed contact lenses and flush with plenty of water for up to 15 mintues. In case of shortness of breath, move to fresh air and provide supplemental oxygen as needed.  All injuries should be reported to EMS personnel for further treatment and transportation. Any personnel requiring transport to a medical facility should be accompanied by a copy of the Safety Data Sheet (SDS) of the suspected chemical involved in the exposure. EMS personnel can be located at 8th Street and Sterling Street.  Rest periods should be provided for all personnel working on site.  Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Warm should be worn to avoid hypothermia.  Site Safety Plan Required? YesNo_X	The most significant : Post extinguishment, while using SCBA. A personnel that have to safety vests and head	safety issue at this there is little risk f Il firefighting gear leen working insid f protection should	incide for resp should the the to the w	ent is exposul piratory expos I be worn whi lenced-in peri orn by all on-	e to any che sure, howev le operating meter, musi site support	emicals or ru er, all firefigl within the fe t go through slaff that are	Inoff from fire nting activitie enced-in peri the decontar e not engage	s should be performed meter of the facility. All nination area. Hi-vis d in firefighting activities.
chemical involved in the exposure. EMS personnel can be located at 8th Street and Sterling Street.  Rest periods should be provided for all personnel working on site.  Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Nithough there is a only a slight chance of rain, personnel should be aware of slick spots due to wet surfaces. Warm slothing should be worn to avoid hypothermia.  Site Safety Plan Required? Yes No  Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill  Position/Title: IMAT Safety  Signature:   Warn  Signature:   Signature:   Position/Title: IMAT Safety  Signature:   Warn  Signature:   Si	skin, remove contami flush with plenty of wa	nated clothing and	i fluch	with plants of	e eyes, and	omiculty on	eatning. In c	ase of contact with the
Report all injuries to the Safety Officer.  The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Nithough there is a only a slight chance of rain, personnel should be aware of slick spots due to wet surfaces. Warm slothing should be worn to avoid hypothermia.  Site Safety Plan Required? Yes No Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill  Position/Title: IMAT Safety  Signature:	chemical involved in th	ne exposure. EMS	S pers	onnel can be	located at 8			
The weather overnight will see a low of 36 degrees farenheit with 100% humidity. Winds 5-15 MPH N with some fog. Although there is a only a slight chance of rain, personnel should be aware of slick spots due to wet surfaces. Warm clothing should be worn to avoid hypothermia.  Site Safety Plan Required? Yes No Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature:	Rest periods should be	e provided for all p	person	nel working o	n site.			
Site Safety Plan Required? Yes No Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: MAT Safety Signature:	Report all injuries to th	e Safety Officer.						
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the	The weather overnight Although there is a onl alothing should be wor	will see a low of 3 y a slight chance on to avoid hypothe	36 deg of rain ermia.	rees farenhei , personnel si	t with 100% rould be aw	humidity. V rare of slick s	Vinds 5-15 M spots due to	PH N with some fog. wet surfaces. Warm
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Approved Site Safety Plan(s) Located At:  Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: A Control of the								
Prepared by: Name: Kyle Hill Position/Title: IMAT Safety Signature: AD-//	. Site Safety Plan Re Approved Site Safe	quired? Yes	No⊠ ed At:		***************************************	***************************************		n
2000				Position/Titl	e: IMAT Sa	fety	Signature:	10111)
	CS 208	IAP Page <u>8</u>		3	***************************************	***************************************		
						***************************************	***************************************	





Page 10

#### **ACTIVITY LOG (ICS 214)**

1. Incident Name:		2. Op	perational Period:	Date Fron	n: Date To:
				Time Fror	m: Time To:
3. Name:		4. ICS Pos	sition:		5. Home Agency (and Unit):
6. Resources Assi	gned:	********************************			
Nar	***************************************		ICS Position		Home Agency (and Unit)
			***************************************		
***************************************		·····	****		
		***************************************			***************************************
**************************************					
		***************************************	······································		
7. Activity Log:		***************************************		***************************************	
Date/Time	Notable Activities				
		***************************************			
		· · · · · · · · · · · · · · · · · · ·			
		<del></del>		*****************************	
***************************************			***************************************		
***************************************					
THE	T MANDON CONTROL CONTR	**-*-			
				***************************************	
				da pakalainin kala ka	
		naccopaccononononanacco		•••••	
			***	***************************************	
				······	
			· · · · · · · · · · · · · · · · · · ·		
***************************************		······································		000000000000000000000000000000000000000	
		***************************************			
		~~~~			
***************************************		•••••			
8. Prepared by: Na	ame:			***************************************	Signature:
ICS 214, Page 1		Da	ate/Time:		